

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO. 70/658460 FILING DATE

APPLICANT(S)

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2		1		1		
3		2		2		
4	2		2			
5	1	2	1			
6		1		1		
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49						
50						
TOTAL IND.	9		2	1		
TOTAL DEP.	1		2	1		
TOTAL CLAIMS	8		8			

CLAIMS	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
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TOTAL CLAIMS						